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DATE: Wednesday, April 02, 2003

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result set

DB=USPT,PGPB,JPAB,EPAB,DWPI; PLUR=YES; OP=OR

L6	soybean same (efa or essential adj fatty adj aid or linolenic or dha or docosahexanoic or eicosapentanoic) same (vitamin adj k or phylloquinone or glutamylcarboxylase)	10	L6
L5	(vitamin adj k or phylloquinone or glutamylcarboxylase) adj5 (intake or rda or dosage or uptake or consumption) adj5 (everyday or daily)	1	L5
L4	(vitamin adj k or phylloquinone or glutamylcarboxylase) same (intake or rda or dosage or uptake or consumption) adj5 (everyday or daily)	6	L4
L3	(vitamin adj k or phylloquinone or glutamylcarboxylase) same (intake or rda or dosage or uptake) adj5 (everyday or daily)	4	L3
L2	(vitamin adj k or phylloquinone or glutamylcarboxylase) same (intake or rda or dosage or uptake)	241	L2
L1	soybean same (efa or essential adj fatty adj aid or linolenic or dha or docosahexanoic or eicosapentanoic) and (vitamin adj k or phylloquinone or glutamylcarboxylase)	90	L1

END OF SEARCH HISTORY

L9 18 SEA ABB=ON PLU=ON (VITAMIN K OR PHYLLLOQUINONE OR MENAQUINONE)
 (P) (ESSENTIAL FATTY ACID OR GAMMALINOLENIC ACID OR EICOSAPENT
 ANOIC OR DOCOSAHEXANOIC OR OMEGA-6 OR OMEGA-3)
 L10 4 SEA ABB=ON PLU=ON (VITAMIN K OR PHYLLLOQUINONE OR MENAQUINONE)
 (P) (CONSUMPTION OR UPTAKE OR DOSE OR DOSAGE OR INTAKE OR
 RDA) (P) (ESSENTIAL FATTY ACID OR GAMMALINOLENIC ACID OR
 EICOSAPENTANOIC OR DOCOSAHEXANOIC OR OMEGA-6 OR OMEGA-3)
 L11 4 DUP REM L10 (0 DUPLICATES REMOVED)
 D L11 IBIB KWIC 1-
 L12 7 S (VITAMIN K OR PHYLLLOQUINONE OR MENAQUINONE) (P) (CONSUMPTION
 L13 6 DUP REM L12 (1 DUPLICATE REMOVED)
 D L13 IBIB KWIC 1-
 L14 6 SEA ABB=ON PLU=ON (NUTRITIONAL OR DIETARY OR FOOD) (3A)
 (SUPPLEMENT) (P) (ADOLESCENTS OR YOUNG ADULTS) AND (OMEGA-3
 FATTY ACID OR OMEGA-6 FATTY AID OR DOCOSAHEXANOIC OR EICOSAPENT
 ANOIC OR ESSENTIAL FATTY ACID)
 L15 4 DUP REM L14 (2 DUPLICATES REMOVED)
 D L15 IBIB KWIC 1-
 L16 413 SEA ABB=ON PLU=ON (VITAMIN K OR PHYLLLOQUINONE OR MENAQUINONE)
 (P) (HIGH OR HIGHER OR LARGE) (3A) (DOSE OR DOSAGE OR
 AMOUNTOR RDA OR INTAKE OR CONSUMPTION)
 L17 1 SEA ABB=ON PLU=ON L16 AND (OMEGA-3 FATTY ACID OR OMEGA-6
 FATTY AID OR DOCOSAHEXANOIC OR EICOSAPENTANOIC OR ESSENTIAL
 FATTY ACID)
 D L17 IBIB KWIC

L15 ANSWER 4 OF 4 MEDLINE

ACCESSION NUMBER: 82145968 MEDLINE

DOCUMENT NUMBER: 82145968 PubMed ID: 6801283

TITLE: Oral correction of **essential fatty acid** deficiency in cystic fibrosis.

AUTHOR: Landon C; Kerner J A; Castillo R; Adams L; Whalen R; Lewiston N J

SOURCE: JPEN. JOURNAL OF PARENTERAL AND ENTERAL NUTRITION, (1981 Nov-Dec) 5 (6) 501-4.
Journal code: 7804134. ISSN: 0148-6071.

PUB. COUNTRY: United States

DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 198205

ENTRY DATE: Entered STN: 19900317

Last Updated on STN: 19970203

Entered Medline: 19820527

TI Oral correction of **essential fatty acid** deficiency in cystic fibrosis.

AB A combination of pancreatic insufficiency and inadequate caloric intake may produce **essential fatty acids** (EFA) deficiency in patients with cystic fibrosis. Seventy-five percent of the **adolescents** and **young adults** with poor weight gain in our clinic were EFA-deficient by total plasma linoleic acid criteria. Twenty of these patients were. . . and activity and, in five teenage girls, regulation of menses. The 16 control patients who received standard pancrelipase therapy and **nutritional supplements** remained fatty acid deficient. We conclude that oral hyperalimentation can restore EFA levels in cystic fibrosis patients if adequate calories. . .

> d l15 ibib kwic 1-
YOU HAVE REQUESTED DATA FROM 4 ANSWERS - CONTINUE? Y/(N):y

L15 ANSWER 1 OF 4 CAPLUS COPYRIGHT 2003 ACS DUPLICATE 1
ACCESSION NUMBER: 2002:722822 CAPLUS
DOCUMENT NUMBER: 137:369294
TITLE: Effect of an organized lipid matrix on lipid
absorption and clinical outcomes in patients with
cystic fibrosis
AUTHOR(S): Lepage, Guy; Yesair, David W.; Ronco, Nancy;
Champagne, Josee; Bureau, Nathalie; Chemtob, Sylvain;
Berube, Denis; Roy, Claude C.
CORPORATE SOURCE: Department of Pediatrics, Hopital Ste-Justine,
Universite de Montreal, Montreal, QC, Can.
SOURCE: Journal of Pediatrics (St. Louis, MO, United States)
(2002), 141(2), 178-185
CODEN: JOPDAB; ISSN: 0022-3476
PUBLISHER: Mosby, Inc.
DOCUMENT TYPE: Journal
LANGUAGE: English
REFERENCE COUNT: 36

THERE ARE 36 CITED REFERENCES AVAILABLE FOR THIS
RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

AB The aim of this study was to compare the absorption of a
lysophosphatidylcholine, monoglyceride, and fatty acid matrix (organized
lipid matrix, OLM) with that of a triacylglycerol (TG)-based fat meal in
patients with cystic fibrosis (CF). Five **adolescents** with CF
and 3 control patients were given fat meals supplemented with retinyl
palmitate of either OLM or TG at a 2-wk interval. In a clin. trial, 73
patients with CF were randomly assigned to **nutritional
supplements** contg. either OLM or TG for a 1-yr double-blind trial
followed by a 6-mo observation period. The peak increases and areas under
the curve for TG and retinyl palmitate after the fat meal were 10-fold
higher after OLM than after the TG fat load and did not differ from values
obtained in control patients. OLM led to better clin. outcomes in terms
of energy intake from the diet, wt.-for-age Z score, **essential
fatty acid** status, vitamin E, and retinol binding
protein. Height-for-age Z score and FEV1 only reached statistical
significance at the end of the 6-mo observation period. These results
suggest that OLM is a readily absorbable source of fat and energy in CF
and is an effective **nutritional supplement**.

L15 ANSWER 2 OF 4 EMBASE COPYRIGHT 2003 ELSEVIER SCI. B.V.
ACCESSION NUMBER: 2000321117 EMBASE
TITLE: [The role of diets in the treatment of inflammatory bowel
diseases].
BEHANDELING VAN CHRONISCHE DARMZIEKTEN: DE PLAATS VAN
DIEETMAATREGELEN.
AUTHOR: Mathus-Vliegen E.M.H.
CORPORATE SOURCE: Dr. E.M.H. Mathus-Vliegen, Afdeling Maag-, Darm- en
Leverziekten, Academisch Medisch Centrum, Postbus 22.660,
1100 DD Amsterdam, Netherlands
SOURCE: Pharmaceutisch Weekblad, (1 Sep 2000) 135/35 (1314-1318).
Refs: 20
ISSN: 0031-6911 CODEN: PHWEAW
COUNTRY: Netherlands
DOCUMENT TYPE: Journal; General Review
FILE SEGMENT: 037 Drug Literature Index
048 Gastroenterology
LANGUAGE: Dutch
SUMMARY LANGUAGE: English; Dutch

AB . . . the patient nutritionally by frequent counselling and by adapting
the diet to conditions of lactose intolerance, steatorrhoea or obstructive
stenosis. **Nutritional supplements** are needed if the

energy (125-145 kJ/kg; 30-35 kcal/kg) and protein (1.5 g/kg) requirements are difficult to meet. Artificial feeding. . . can be considered as both a supportive and a primary treatment, being the second best after steroids. In children and **adolescents** at risk of growth failure and in steroid resistant or intolerant adults it is the first choice. The subject of. . .

CT Medical Descriptors:

- *enteritis: DT, drug therapy
- *enteritis: TH, therapy
- *nutritional support
- *diet therapy
- malnutrition
- lactose intolerance: DT, drug therapy
- steatorrhea
- enteric feeding
- total parenteral nutrition
- artificial feeding
- human
- review
- amino acid
 - omega 3 fatty acid**
- carbohydrate
- antioxidant
- probiotic agent
- lactase: DT, drug therapy
- glucose polymer
- prednisone: DT, drug therapy
- salazosulfapyridine: DT, drug therapy

L15 ANSWER 3 OF 4

MEDLINE

ACCESSION NUMBER: 1999155711 MEDLINE
DOCUMENT NUMBER: 99155711 PubMed ID: 10036686
TITLE: Nutrition in the adolescent.
AUTHOR: Wahl R
CORPORATE SOURCE: Department of Pediatrics, Steele Memorial Children's Research Center, University of Arizona Health Sciences Center, Tucson 85724-5073, USA.
SOURCE: PEDIATRIC ANNALS, (1999 Feb) 28 (2) 107-11.
Journal code: 0356657. ISSN: 0090-4481.
Report No.: PIP-147438; POP-00292342.
PUB. COUNTRY: United States
DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals; Population
ENTRY MONTH: 199903
ENTRY DATE: Entered STN: 19990324
Last Updated on STN: 20021101
Entered Medline: 19990305

AB . . . and athletic involvement. Energy (calories) and protein are essential in pubertal development. Adolescent females require approximately 2200 calories/day, whereas male **adolescents** require 2500-3000 calories/day. Additional intake requirements include fat, calcium, iron, zinc, vitamins, and fiber. The clinical assessment of nutritional status. . . can have long-term consequences, including delayed sexual maturation, loss of final adult height, osteoporosis, hyperlipidemia, and obesity. As for vegetarian **adolescents**, nutritional risks include lack of iodine, vitamin B12, vitamin D, and some **essential fatty acids**. In addition, substances in some grains reduce gut absorption, thus increasing mineral deficiencies. Pregnancy may also be a risk factor. . . adolescence. A pregnant adolescent has different nutritional needs because she is still growing. Among adolescent athletes many are turning to **nutritional supplements** in an attempt to improve athletic performance. A

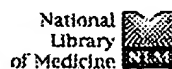
balanced, varied diet provides adequate calories and nutrition to meet the needs of most **adolescents**. They also have greater water needs than do adult athletes. Details on adolescent health concerns are further discussed in this. . .

L15 ANSWER 4 OF 4 MEDLINE
ACCESSION NUMBER: 82145968 MEDLINE
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SOURCE: JPEN. JOURNAL OF PARENTERAL AND ENTERAL NUTRITION, (1981 Nov-Dec) 5 (6) 501-4.
Journal code: 7804134. ISSN: 0148-6071.
PUB. COUNTRY: United States
DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 198205
ENTRY DATE: Entered STN: 19900317
Last Updated on STN: 19970203
Entered Medline: 19820527
TI Oral correction of **essential fatty acid** deficiency in cystic fibrosis.
AB A combination of pancreatic insufficiency and inadequate caloric intake may produce **essential fatty acids** (EFA) deficiency in patients with cystic fibrosis. Seventy-five percent of the **adolescents** and **young adults** with poor weight gain in our clinic were EFA-deficient by total plasma linoleic acid criteria. Twenty of these patients were. . . and activity and, in five teenage girls, regulation of menses. The 16 control patients who received standard pancrelipase therapy and **nutritional supplements** remained fatty acid deficient. We conclude that oral hyperalimentation can restore EFA levels in cystic fibrosis patients if adequate calories. . .

L11 ANSWER 3 OF 4 EMBASE COPYRIGHT 2003 ELSEVIER SCI. B.V.
 ACCESSION NUMBER: 92052481 EMBASE
 DOCUMENT NUMBER: 1992052481
 TITLE: [Influence of oral doses of fish-oil on the status of lipid
 soluble vitamins in man].
 DER EINFLUSS VON FISCHÖLGABEN AUF DEN STATUS FETTLÖSLICHER
 VITAMINE BEI PROBANDEN.
 AUTHOR: Most E.; Elmadfa I.
 CORPORATE SOURCE: Institut für Ernährungswissenschaft, Universität Wien,
 Lammgasse 9, A-1080 Wien, Austria
 SOURCE: Aktuelle Ernährungsmedizin Klinik und Praxis, (1991) 16/6
 (280-285).
 ISSN: 0341-0501 CODEN: AEKPDQ
 COUNTRY: Germany
 DOCUMENT TYPE: Journal; Article
 FILE SEGMENT: 029 Clinical Biochemistry
 030 Pharmacology
 037 Drug Literature Index
 LANGUAGE: German
 SUMMARY LANGUAGE: German; English

AB In the present study the influence of **.omega.-3-fatty**
 acids on the status of the lipid soluble vitamins A, D, E and K1 in
 plasma/serum was determined. Complementary, the . . . was tested on the
 content of vitamin E and on formation of peroxides. Ten healthy male
 adults obtained 2.26 g **.omega.-3** fatty acids as
 fish-oil capsules for four weeks. At the end of the study serum contents
 of **.alpha.-tocopherol** showed a . . . 2 I.U./G oil. The bioavailability
 of the lipid soluble vitamins A, E, D and K1 was deteriorated due to the
intake of polyunsaturated fatty acids. In spite of the
 supplementation with vitamin E the status of antioxidants was slightly
 impaired. Regardless to the intense decline of vitamin K1 the plasmatic
 coagulation system was yet not influenced. At long-term **intake**
 and higher **doses** decreased synthesis of **vitamin-**
K-dependent coagulation factors can not be excluded.

L15 ANSWER 4 OF 4 MEDLINE
 ACCESSION NUMBER: 82145968 MEDLINE
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1: Gut 1976 Jun;17(6):450-5

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Factors affecting the absorption of vitamin K-1 in vitro.

Hollander D, Rim E.

Factors which might affect the absorption of vitamin K of dietary origin were investigated using everted small bowel sacs. Increasing the bile salt concentration to 20 mM or the addition of long chain fatty acids, monoolein, or lecithin all resulted in significant (P less than 0.05) decrease in the absorption rate of the vitamin. The addition of 2-5 mM short and medium chain fatty acids did not change the absorption rate of vitamin K-1 (P greater than 0.05). The absorption rate of vitamin K-1 appears to be modified by the presence of compounds in the incubation medium which either alter the partition of the vitamin between the micelle and the cell membrane or which change the permeation characteristics of the compound through the unstirred water layer or modify the physical characteristics of the cell membrane itself. It is possible that some of the above factors modify the absorption of lipid soluble compounds in general.

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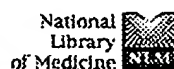
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PMID: 955502 [PubMed - indexed for MEDLINE]

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1: Biochem Biophys Res Commun 1985 Apr 16;128(1):211-9 Related Articles, Links

Entrez PubMed

Anti-oxidant/pro-oxidant reactions of vitamin K.

Canfield LM, Davy LA, Thomas GL.

PubMed
Services

Experiments were designed to measure O₂ consumption caused by the oxidation of linoleic acid. These experiments show that vitamin K has antioxidant activity and that the reduction in linoleic acid oxidation is directly dependent upon vitamin K concentration. Conversely, vitamin K hydroquinone enhances linoleic acid oxidation in the absence of iron catalyst, again in a concentration dependent manner. At equimolar concentrations vitamin K is about 80% as effective as vitamin E as an antioxidant. Vitamin E inhibits the oxidation of linoleic acid catalyzed by vitamin K hydroquinone. Vitamin E also strongly inhibits vitamin K dependent formation of both vitamin K epoxide and gamma-carboxyglutamic acid (gla). The significance of these observations to vitamin K action in vivo is discussed.

PMID: 3985964 [PubMed - indexed for MEDLINE]

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